

NEVADA FINANCIAL DISCLOSURE STATEMENT

(Attach additional sheets if necessary.)

JAN	0 8	5 2007
COM	MS	SION

NAME <u>Sichard</u> Sarys MAILING ADDRESS <u>Fig. Box 411</u> CITY, STATE, ZIP Vinginia City, Nov. 89440 TELEPHONE 775-847-0564	LENGTH OF RESIDENCE IN NEVADA 47 102 LENGTH OF RESIDENCE IN DISTRICT WHERE REGISTERED TO VOTE [per NRS 281.571(1)(a)] 27 9 ms
List all public offices for which this financial disclosure stateme	
Public Office Elected (E) or Annual Appointed (A) Compensation A \$/0000	
List all general sources of income for you and members of your	
List all general sources of income for you and members of your Dorax Belas - Refired	Nousehold over 18 years of age [NRS 281.571, Subsection 1(b)]: Self Household Member 2,000 Monthly
List each creditor to whom you or a member of your household or deed of trust on real property which is not required to be listed we were the personal use was retained by seller] [NRS 281.571, Subs	owes \$5,000 or more [except (1) debt secured by mortgage delow, and (2) debt for which a security interest in a motor section 1(d)]:
	Self Household Member

a class of stock or security repr [NRS 281.571, Subsection 1(f)]:	re, syndicate, corporation or assoc ry of a trust, director, officer, owner esenting 1% or more of the total ou	in whole or in part, limite tstanding stock or securit	d or general partner, or holder of ies issued by the business entity Self Household Member
List the identity of donor and val during the preceding taxable year consanguinity or affinity; and (2) occasion if the donor does not ha	ue of each gift received in excess or [except (1) a gift received from a ceremonial gifts received for a birth ve a substantial interest in your legi	of an aggregate value of person who is related to	you within the third degree of
[NRS 281.571, Subsection 1(e)]:	Donor	,	Value of Gift
			\$\$
			\$ \$
/	OVIDED HEREIN IS ACCURATE AI		
Revised 8/23/2005	NEVADA FINANCIAL DISCLOSURE S	STATEMENT	DECEIVED DI JAN 0 5 2007

Page 2 of 2